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APPLICANTS

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** CONTINUING DATA ***** *None.*
WDH

** FOREIGN APPLICATIONS ***** *None.*
WDH

IF REQUIRED, FOREIGN FILING LICENSE GRANTED ..
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Foreign Priority claimed	<input type="checkbox"/> yes <input checked="" type="checkbox"/> no	35 USC 119 (a-d) conditions met	<input type="checkbox"/> yes <input checked="" type="checkbox"/> no <input type="checkbox"/> Met after Allowance	STATE OR COUNTRY NY	SHEETS DRAWING 6	TOTAL CLAIMS 37	INDEPENDENT CLAIMS 10
Verified and Acknowledged	<i>D. Lally WDH</i>		Examiner's Signature Initials				

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TITLE

Method and system for document component important and reconciliation

FILING FEE RECEIVED 1542	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:	<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees (Filing) <input type="checkbox"/> 1.17 Fees (Processing Ext. of time) <input type="checkbox"/> 1.18 Fees (Issue) <input type="checkbox"/> Other _____ <input type="checkbox"/> Credit
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